Government of Saskatchewan

Annual Report 1983 - 84

Saskatchewan Health

Community Services
Swift Current Region

85-1769/

Message from the Chairman of the Board

As Chairman of the Board of Health Region No. 1, I am pleased to have this opportunity to submit a brief statement in the Swift Current Health Services Annual Report.

The Ad Hoc Committee to Review Health Region Boards was formed a year ago, however, did not become active until January of this year. This Committee was established to review the role of health region boards and district health councillors because of the interest expressed by board members, and because the Department of Health is currently in the midst of a major legislative review. This review includes The Health Services Act and The Public Health Act, both of which make extensive references to regional boards and district health councillors.

At the present time, there are three organizational levels involved in public health services: regional boards of health, district health councils and municipal boards of health. Under the current structure, a few problems of concern which were identified and discussed were: lack of interest in public health matters by boards and council members; lack of communication between boards, councils and municipalities; poor participation, particularly by district health councillors.

Dr. R.S. Nichols, Orthadontist from Bozeman, Montana, continues to practice out of offices situated in the E.I. Wood Building in Swift Current. He does not practice here on a full-time basis, but he does have full-time staff capable of making necessary repair or adjustments.

No further change has taken place in respect of the Administration Department. Staff continue to work directly under The Medical Care Insurance Commission processing medical claims under a computerized system.

In closing, I wish to extend sincere appreciation to Community Health Services Department personnel for their dedication and team work in the promotion of health care programs. I would like to acknowledge the interest Regional Board Members and some District Health Councillors have shown in promoting health care. However, much more interest and concern must be shown in health issues, otherwise, there will be no future purpose for boards and district health councillors.

J.J. Kurtz,
Board Chairman

Regional Board of Health

Back Row: Left to right - Rueben Iles; Marvin Hinds; Andrew Lockhart; John Kimber; John Barber
Front Row: Left to right - Ted Frisz; Jacob Kurtz; Wally Popein; Matt Robertson; Donat Girard; Walter Manley
Missing Board Members: Ernest Howes and Gordon Shuttleworth

Members of the Regional Board of Health

Mr. J. Kurtz.....Chairman
Mr. M. Hinds.....Vice Chairman
Mrs. W. Popein.....Executive Director

CITY
Mr. M. Hinds.....Swift Current
366 - 5th Avenue Southest, Swift Current

VILLAGES
Mr. G. Shuttleworth.....**Bracken**
Bracken
Mr. E. Howes.....**Sceptre**
Sceptre
Mr. J. Barber.....**Stewart Valley**
Stewart Valley
Mr. M.S. Robertson.....**Success**
Success
Mr. J. Kimber.....**Tompkins**
Tompkins
Mr. R. Iles.....**Webb**
Webb

RURAL MUNICIPALITIES
Mr. D. Girard.....**White Valley No. 49**
Eastend
Mr. W.T. Manley.....**Reno No. 51**
Consul
Mr. A. Lockhart.....**Big Stick No. 141**
Box 363, Maple Creek
Mr. T.A. Frisz.....**Enterprise No. 142**
15 Craven Place S.E., Medicine Hat
Mr. J.J. Kurtz.....**Happyland No. 231**
Box 40, Mendham

Saskatchewan
Health

District Health Councillors

LEADER DISTRICT

Towns

Burstall - Mr. A. Jassman
Burstall

Cabri - Mrs. R. Kirkpatrick
Cabri

Leader - Mr. M. Clary
Leader

Villages

Abbey - Mr. W. R. Brawn
Abbey

Fox Valley - Mr. J. Koch
Fox Valley

Hazlet -

Lancer - Mr. L. Jorgenson
Lancer

Mendham - Mr. W. Stroh
Mendham

Prelate - Mr. J. Moldenhauer
Prelate

Richmound - Mr. L. Franz
Richmound

Sceptre - Mr. E. Howes
Sceptre

Shackleton - Mr. S. Morrey
Box 32, Shackleton

Rural Municipalities

Enterprise No. 142 -Mr. T. A. Frisz
15 Craven Place S.E., Medicine Hat

Pittville No. 169

Fox Valley No. 171 -Mr. R. Hellman
Box 52, Richmound

Misty Creek No. 229 -Mr. D. Baar
Abbey

Climsworth No. 230 -Mrs. S. Watson
Abbey

Happyland No. 231 -Mr. J. J. Kurtz
Box 40, Mendham

Bear Perks No. 232 -Mr. R. Ehnisz
Burstall

SHAUNAVON DISTRICT

Eastend - Mr. C. Thompson
Eastend

Shaunavon - Mr. J. Greenslade
Box 941, Shaunavon

Villages

Admiral - Mr. I. Spetz
Admiral

Bracken - Mr. G. Shuttleworth
Bracken

Climax - Mr. K. Mything
Climax

Consul - Mr. W. Manley
Box 90, Consul

Dollard Mr. R. Goulet
Box 4, Dollard

Frontier - Mr. D. Stengler
Frontier

Robsart - Mr. E. Syverson
Robsart

Val Marie - Ms. L. Carlier
Box 178, Val Marie

Rural Municipalities

Val Marie No. 17 -Mr. M. Jaeger
Climax

Lone Tree No. 18 -Mr. B. Brown
Climax

Frontier No. 19 -Mr. E. Nelson
Frontier

Glen McPherson No. 46 - Ms. H. Henderson
Ponteix

White Valley No. 49 - Mr. D. Girard
Eastend

Reno No. 51 - Mr. W. Manley
Consul

Greasy Creek No. 78 - Mr. L. Meloche
Box 400, Shaunavon

Arlington No. 79 - Mr. R. Thienes
Box 97, Tompkins

Reno Creek No. 166 -Mr. B. Meinert
Shaunavon

MAPLE CREEK DISTRICT

Towns

Gull Lake - Mr. E. Douglas
Gull Lake

Maple Creek

Villages #

Carmichael - Mr. H. Haney
Box 517, Gull Lake

Golden Prairie - Mr. L. Oddan
Golden Prairie

Piapot - Mr. S. McGillivray
Piapot

Tompkins - Mr. J. Kimber
Tompkins

Rural Municipalities

Carmichael No. 109 -Mrs. J. Murray
Box 316, Tompkins

Piapot No. 110 - Mr. K. Wright
Piapot

Maple Creek No. 111 - Mr. J. Schock
Box 1016, Maple Creek

Gull Lake No. 139 -Mrs. C. Springer
Gull Lake

Big Stick No. 141 -Mr. A. Lockhart
Box 636, Maple Creek

SWIFT CURRENT DISTRICT

City

Swift Current - Mr. M. Hinds
366 - 5th S.E., Swift Current

Towns

Ponteix - Mr. R. Vallee
Ponteix

Villages

Aneroid - Mr. J. McMillan
Aneroid

Cadillac - Mrs. V. Kendall
Cadillac

Neville - Mr. I. Dyck
Box 123, Neville

Pennant - Mr. H. Horvey
Pennant

Rush Lake - Mrs. W. Heffley
Rush Lake

Stewart Valley - Mr. W. Kreuger
Box 40, Stewart Valley

Success - Mr. M. Robertson
Success

Vanguard - Mr. R. Kehoe
Vanguard

Waldeck - Mrs. K. Lang
Waldeck

Webb - Mr. R. Iles
Webb

Rural Municipalities

Auvergne No. 76 - Mr. B. Raymond
Aneroid

Wise Creek No. 77 - Mr. K. Kendall
Box 98, Cadillac

Glen Bain No. 105 - Mr. J. Strawford
Vanguard

Whiska Creek No. 106 - Mr. J. Holenski
Vanguard

Lac Pelletier No. 107 - Mr. J. Koop
Box 1390, Swift Current

Coulee No. 136 - Mr. V. Wilson
Site 4, Box 5, Swift Current

Swift Current No. 137 - Mr. G. Bulin
873 - 9th N.E., Swift Current

Webb No. 138 - Mr. B. Whitney
321 MacDonald Dr., Swift Current

Excelsior No. 166 - Mr. D. Meyer
Box 98, Rush Lake

Sask. Landing No. 167 - Mr. J. Barber
Stewart Valley

Riverside No. 168 - Ms. S. Williams
Pennant

Regional Executive Director's Report

It is with pride that I submit the 1983-84 Swift Current Region's Annual Report on behalf of the Community Health Services Staff.

Since my employment of December, 1983, it has become increasingly obvious to me that I am fortunate to have joined the Community Health Services Branch as I find the staff to be highly professional, knowledgeable and supportive. The mandate given to the Community Health Services Branch is accepted with enthusiasm by the staff of the Swift Current Region.

My employment marks another first for the Swift Current Region in that both Community and Psychiatric Services are now under the jurisdiction of one administration that my office is responsible for. This exciting concept presents many progressive possibilities and I would like to thank my Superiors and Headquarters Staff for their support to date.

I have been heavily involved with our Region's Board and District Health Councils and sincerely anticipate that the ongoing discussions with our Government will provide for a progressive future mandate.

The main objective of Community Health Services is to promote and protect the health of individuals and families in the Community. I am pleased to report that there have been no serious outbreaks of infectious diseases in our Region.

The Swift Current Region is fortunate to now have the services of a Nutritionist who commenced her duties February 1, 1984.

Saskatchewan Hearing Aid Plan (S.H.A.P.) continues to hold clinics in the Swift Current office four days a month. Appointments may be made by calling the Swift Current office, 773-8301.

The Saskatchewan Aids to Independent Living (S.A.I.L.) continues to assist handicapped persons in an attempt to help them live independently at home. Supplies are provided on a loan basis.

The Rheumatic Fever Control Program provides Penicillin tablets to 50 persons in the Region.

I would like to thank Dr. Burkholder for the medical expertise provided to our Region.

In closing, I trust you will find this annual report informative and would again like to thank the Swift Current Health Region staff for their work and support.

Mr. Lee Spencer
Regional Executive Director

Medical Health Officer's Report

While it is difficult to measure accurately the health of a population group, I shall point out several trends and indirect measures. To the extent that the efforts of Community Health Services contribute to that trend, I credit a staff of competent persons who, with the support of the Regional Executive Director, have been providing preventive services throughout the year. Many of my tasks have been lightened in my absence because of capable resident staff. I did nevertheless visit the Region thirty-one times during the year, besides providing uncounted phone consultations and consultations with staff, physicians and members of the public.

According to statistics at end of this report, the Region had Saskatchewan Hospital Services Plan -covered population of 48,681 - a net increase of 0.4% over previous year. Natural increase i.e. total births less total deaths amounts to 0.64% with the difference likely attributed to a small net out-migration.

Crude Birth Rate at 14.7 per thousand population is below provincial rate of 17.6. Births to unmarried mothers at 8.8% of all births, were second lowest regional rate in Saskatchewan and much lower than provincial average of 19.8%. Deaths of infants in first year of life amounted to a rate of 4.2 per 1,000 births, well below provincial rate of 9.9.

Crude death rate of 8.3 per 1,000 population compares with a provincial rate of 7.5, likely due to somewhat older age distribution of population. Causes of death as listed at end of report show little difinite change. They are compatible, however, the general trends, i.e. a tendency for heart disease deaths to level off, and some kinds of malignacies to increase. Nationally, there is evidence that female deaths from heart disease and lung cancer approach male patterns, in line with trends in smoking habits. Accidental and other violent deaths while low in numbers occur at youngor ages, resulting in high "Potential Years of Life Lost". This is an area of concern for potential prevention.

A low frequency of vaccine-preventable diseases is an implied measure of community health. The seven diseases for which vaccine is routinely given, i.e. tetanus, diphtheria, pertussis, polio, measles, mumps and rubella, are now so rarely reported that each one needs to be confirmed by strict medical diagnosis. Outbreaks of lesser conditions such as scabies and head lice occur periodically. While emotionally charged, these conditions are readily treated and not very health-threatening.

Rabies continues to increase in wild life, with 29 confirmed cases reported during the year in the Region. It follows geographic and chronological cycles in nature. Human contact can usually be avoided by vaccinating companion animals; preventing exposure of pets and animals to wild life; destruction or prolonged control of animals after exposure to wild life; avoidance of contact with saliva or mouth of any sick animal; and by avoiding all contact with wild animals.

Dr. J.N. Burkholder
Medical Health Officer

Public Health Nursing Report - April 1983 - March 1984

Nurses represent more than 65% of all health professionals. Today's nurse is educated in health promotion, health maintenance and preservation, illness prevention and supportive care of the chronically ill. Public Health Nurses are a vital link in this health care delivery, as they work with individuals and families in the community setting.

Public Health Nursing Staff Changes

We have had some changes in our Public Health Nursing staff during the year. One Shaunavon nursing district was vacant for a number of months during the year.

Leader District Office

No changes.

Maple Creek Office

Mrs. Della Stumborg (Westman), BScN, transferred to the Swift Current office on May 1, 1983.

Mrs. Corinne Arnold, BScN, commenced employment in the Maple Creek office on May 1, 1983.

Shaunavon Office

Mrs. Leslie Wagner, BScN, resigned from staff effective July 14, 1983.

Ms. Mariette Lucas, Dip. P.H., was appointed on a temporary basis, May 16, 1983, to this position, and on a permanent basis effective July 18, 1983.

Mrs. Karen Laidlaw, BScN, resigned from staff effective September 16, 1983.

Mrs. Rana Meinert, BScN, worked on a part-time basis until her resignation September 9, 1983. This position was vacant until February 13, 1984, when Miss Kathy Nybo, BScN, was appointed.

Swift Current Office

Mrs. Joan Whiteside was away on educational leave for one year, commencing May 1, 1983. Mrs. Della Stumborg, BScN, transferred from Maple Creek to this position.

Mrs. Bonnie Shaw, BScN, was away on a six month maternity leave from May 1, 1983, to November 1, 1983. During this time her district was shared by Mrs. Heather Miller, BScN, and Mrs. Debbie Cortus, BScN.

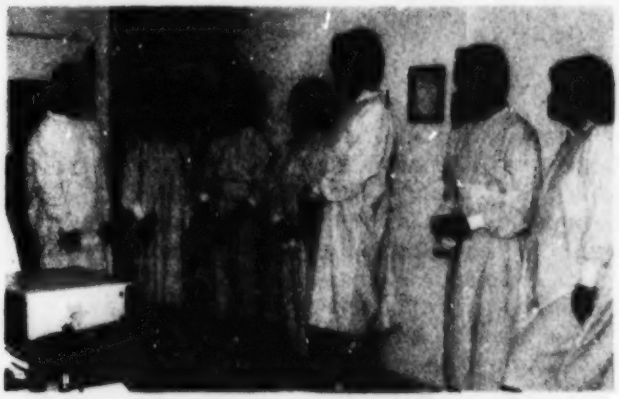
Mrs. Sharon McLaughlin who had been working on a part-time basis resigned effective February 10, 1984.

Public Health Nursing Services

This report includes a number of photographs depicting the Public Health Nurses delivering the various services provided in our communities. Statistical reports are attached.

Expectant Parent Classes

Series of classes for expectant parents are held throughout the Region. Four different formats for the classes are used to meet the needs of those participating. These include Early Bird Classes, Late Bird Classes, Traditional Classes and Update Classes. During the classes, information is given regarding pregnancy, child birth, care of the infant and guidance for adjustments in the new family structure. Relaxation and breathing techniques are demonstrated and practised by the participants.



One of the sessions includes a tour of the hospital obstetrical ward. These tours are planned jointly with the hospital staff.

Home visits are also made to those unable to attend classes, if referrals are made to our office.

Nursing Report

Postnatal Health Care

The Public Health Nurse visits the new mothers on the hospital wards in the immediate post partum period to acquaint the mother with the services available from the Community Health Services.

The Public Health Nurse and the Hospital staff nurse review the patient caseload before the Public Health Nurse visits the patients on the ward.

Home visits to the family very soon after the babe's arrival home are based on the needs of the family and to provide guidance and assistance to the family. The parents are encouraged to attend Child Health Conference within the first month after delivery.

Child Health Conference

Child Health Conference provides continued health supervision of young children through:

1. observation and screening the child's physical and emotional development.

2. early intervention in health problems and referral to appropriate agencies.

3. specific preventive immunization measures.

There are 30 Child Health Conference sites in our Health Region.

All Child Health Conferences have an appointment system to facilitate convenience for the families. The assistance of community volunteers who keep these appointment schedules is gratefully acknowledged. Many of these volunteers provide this service in addition to their work in the post office, the R.M. office, Credit Unions, or as other interested community citizens.

Nursing Report

Happy Birthday checks were introduced into parts of the Region this year. All three to five year old children are invited to attend the clinic in the month of their birthday. These visits provide an opportunity for the Public Health Nurse to assess the growth and development of the child and discuss any concerns the parents may have.

Special counselling services for student in high schools are especially important. These young people need much support and guidance as they make decisions regarding their health.

Schools are visited on a regular on-going basis through the school year. The Public Health Nurse carries out various screening procedures and assists parents in referrals to appropriate resources. The Public Health Nurse acts as a resource person on various topics to the classroom teachers.

Nursing Report

Well Adult Health Clinics are continuing to be well attended. Six sites for such clinics operate in the Health Region. Participants receive counselling, information and instructions regarding health maintenance, care of specific diseases and conditions, nutrition and medication.

Our present sites are:

Rural -	Tompkins Ponteix Burstall Piapot	Held for ½ day once monthly
City -	Prairie View Lodge Heritage Tower	Held for ½ day each week

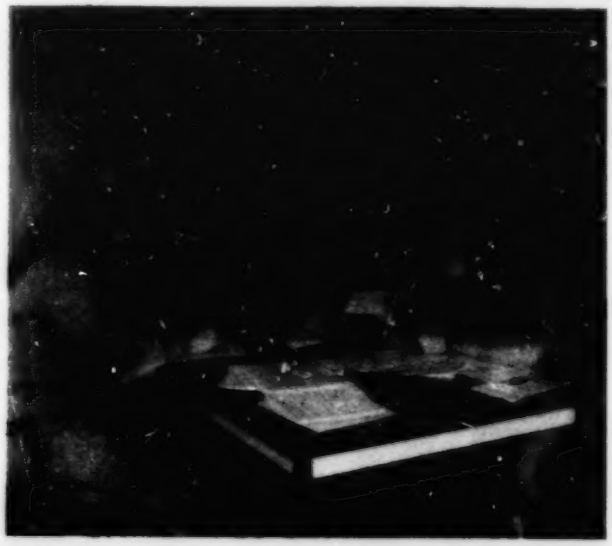
A high priority service is investigation of cases and of contacts of Communicable Disease. Information and guidance are given to individuals and families in dealing with such conditions. The Public Health Nurse and Public Health Inspector often work together on these investigations.

Health Information and immunization necessary for international travel is available and provided by Public Health Nurses. Often information is given by telephone and then appointments made for the immunization.

Public Health Nurses are involved in assessment of home and individuals for equipment, available from the Saskatchewan Aids to Independent Living (S.A.I.L.). Some equipment is maintained in our sub-depot at the Swift Current office.

Nursing Report

Collaboration and communication with other community personnel and agencies is an important link in providing Public Health Nursing service. Referrals are made as appropriate and necessary follow-up care is planned.



A Health Record Audit Committee has reviewed a number of records during the past year. This peer review of the nursing service provided is an important tool for reflecting on how the nursing service is given by the manner in which recording is done.

A basic orientation for newly recruited members to the Public Health Nursing Staff is essential to familiarize the new employee with the services and programs of our Health Region.

The community input from members of our Health Region Board is vital for planning of delivery of services, to their communities. This communication assists in focusing on the needs of each community.

Nursing Report

Regular staff meeting are essential to maintain a well informed cohesive staff. Part of the staff meeting time is used for inservice programs. Continuing education is a necessary element to help staff remain aware of current trends and developments.

The assistance of clerical support staff in all office is gratefully acknowledged. Their contributions to the effective and smooth operation of the Public Health Nursing program is essential.

Throughout the year Public Health Nurses are often involved in various educational programs for community groups. An example is the promotion of National Non-Smoking Week. A display was prepared in the foyer of the E.I. Wood Building. Support was also given to the community "Time to Quit" smoking cessation program. (no photos available of these programs)

I want to acknowledge the co-operation and support of all the other staff disciplines within our Region. A warm and sincere thank you to the Public Health Nurses who day to day carry out the services in their district. Together we are all striving for Health Promotion and Health Preservation.

I am pleased to submit this report.

Dolores Ast
Regional Nursing Supervisor

Public Health Inspection Report

F. Peters
Senior Public Health Inspector

Staff

The Public Health Inspection Staff of one Senior Public Health Inspector, one Public Health Inspector II and three Public Health Inspectors, has been at full complement for the fiscal year 1983-84.

Mr. Martin McLeod, Public Health Inspector Trainee, had three months of field training with our staff of Public Health Inspectors, from June 1 to August 31, 1983.

Rabies Statistics

Health Regions #1, 2, and 3 reported a higher number of positive rabies for the year 1983 than in past years:

HR #1	2 cattle
	27 skunks
	29 Positive
HR #2	35 positive animals
HR #3	35 positive animals

This is from a report by Dr. D.J. Allison - Epidemiologist - Dept. of Health.

Swimming Pool Operators Course

A one day swimming pool operators course was held in Swift Current on June 26, 1983. Seventeen attended the course from various parts of the Swift Current Region.

National Sanitation Training Program

A one day Food Service Personnel Training Course was held in Swift Current on May 30, 1983. Thirteen people attended the course and successfully completed the certification exam.

General Comments

- A tornado hit the village of Pennant in July, 1983, causing much damage, but did not disrupt the sanitary services.

- Many pesticide, herbicide container disposal sites have been established in the Swift Current Region.

- The Public Health Inspectors have made many inspections for approval of plumbing facilities in community halls and recreational facilities. This approval is required before the Department of Culture and Youth will make grant monies available.

- The report for Public Health Inspection is presented in Pictorial Form entitled "Focus on Sanitation".

The Statistical Report is in the Appendix.

We appreciate the support of the Health Region Board, District Health Council as well as Municipal and Urban Councils.

J. Bower
Public Health Inspector II

Focus on Sanitation

The following is a series of photos of some of the programs that Public Health Inspectors are involved in.

Micro wave oven test at a restaurant
Inspectors are involved in testing commercial micro wave ovens for radiation leakage. These are tested on a yearly basis with reports sent to the Radiation Branch of the Department of Labour.

Dairy Display
We inspect food processing, wholesale and retail outlets on a yearly basis to ensure proper sanitation, storage, handling of food and related products. Proper temperature control is important in meat, dairy and frozen display areas.

Rodac Swabbing of a glass
Bacterial cultures are collected from glasses and utensils at restaurants and liquor outlets on a yearly basis. In this instance a glass is rolled across a sterile media to collect bacteria. The plate is then allowed to incubate at room temperature and the result is shown on the right. These bacterial colonies indicate poor dishwashing practices which require change before retesting.

Public Well
Public wells are inspected yearly during the summer months to ensure protection of the source. Proper cribbing and covers are needed and enclosed pump buildings (as shown) are checked for general maintenance and sanitation. All water supplies are subject to contamination and must be protected.

Pest/Herbicide Collection Site
A recent program introduced by the Departments of Environment and Health involves the collection, storage, crushing and disposal of properly rinsed herbicide and pesticide containers. Collection sites are designated, fenced and posted (usually at municipal waste disposal grounds) and inspected by our staff to ensure that the containers do not contaminate the surrounding environment.

Liquid Waste Truck
Health inspectors are involved in licensing Liquid Waste Transportation. Liquid and solid waste collected from septic and pump out tanks, waste oil pits, grit interceptors at car washes, etc., have to be hauled and disposed of in an approved location.

Focus on Sanitation

Placarding of Substandard House
We are sometimes called upon to placard substandard houses as unfit for habitation. Under the Public Health Act and the Urban Municipalities Act, houses can be placarded for lack of plumbing, unsafe construction, or as a rat harbourage.

Plumbing Inspection
Urban and rural plumbing installations are inspected by our staff to ensure safe and correct installation. Proper trapping and venting of fixtures as well as proper drainage is needed to avoid blockages of pipe or the entrance of sewer gas into the home.

Trailer Court
Trailer Courts and Mobile Home Courts are inspected and licensed by our Department on a yearly basis. Inspections are conducted in the fall to ensure proper upkeep, adequate skirting of trailers, safe water and sewage systems, proper garbage control, etc.

Training Courses
Our region is involved in conducting Food Handler and Swimming Pool Operator Training Courses. These are a series of slides, movies, lectures and discussion, designed to educate and inform the participants.

Picnic Site
Picnic camping and recreational areas are also part of an inspectors workload. Again general sanitation and maintenance, safe water supply, sewage and garbage disposal, are the priorities of inspection.

Waste Disposal Ground
Public Health Inspectors inspect waste disposal grounds as an important part of their workload.

Speech-Language Pathologist Annual Report 1983-84

Speech-Language Services in the Swift Current Health Region have altered slightly again during the past twelve months. As stated in last year's report, all the Health Regions were to add another full-time Speech-Language Pathologist to their complement but in the case of Swift Current we were given the services of a part-time Speech-Language Pathologist who travels to the Leader office, from Kindersley, once a week.

Activities for the year included presentations to: the Life Start Program in Frontier, the prenatal update classes in Swift Current and Public Health Nursing staff conferences. A few days were also spent in the Rosetown Health Region to meet with the two new Speech-Language Pathologists. They in turn spent several days in Swift Current as part of their orientation to Community Health Services Branch.

One of the major projects headed by the Speech-Language Pathologist consultant was the Speech-Language Pathologist Program Review. This document was completed in October, 1983, and contains policies and recommendations to be followed province-wide. This is indeed a major step in improving services in Saskatchewan.

The Kindergarten screening which had been done by Community Health Services Branch during the past three years was not done this year. Since it seemed more time efficient for the school system to do it's own screening, Community Health Services Branch did not participate this year. However, close communication still exists with the Shared Service person.

With the newly established play schools in some areas of the Swift Current Health Region, requests were received to screen all the children attending playschool for speech and language development. This screening has been worthwhile since the age range of the children is between the age three to five which follows the premise of the Speech Language Pathology program of early indentification, early intervention and prevention of communicable disorders.

We were very pleased to welcome our new Regional Executive Director, Mr. L. Spencer, in December, 1983. Since his arrival he has been a supportive and innovative manager and we feel fortunate to have someone of his calibre.

A special Thank You goes to Mrs. Bea Williams who devoted so much of her time to the Swift Current Health Region while we were without a permanent administrator. Without her, the past two years would not have kept the various programs operating as well as they did.

We also appreciate Dr. J. Burkholder's ongoing visits to Swift Current. His input and thought provoking comments are a valuable contribution to Swift Current Health Region.

The Public Health Nurses continue to be a vital part of the Speech-Language Pathology program. Their untiring efforts in referring very young children with suspected communication disorders are very much appreciated.

Without the co-operation and equanimity of our clerical staff our efforts in providing quality service could not be realized.

Respectfully submitted,

Maria Tuchscherer, M.S.
Speech-Language Pathologist

Early Childhood Psychology Report

The Early Childhood Psychologist is based in Moose Jaw and shares his services with this Region. This amounts to approximately four days per month in the Swift Current Health Region and, for the past year, approximately 19% of the time. Because of the distances and travel times involved, most of the services are offered through the Regional Office in Swift Current. Consequently, parents from the Region are usually required to travel to Swift Current for appointments. A limited number of trips to District Offices have been made under unusual circumstances.

The Early Childhood Psychologist has been the representative for Community Health Services on the Admissions and Review Committee of the Swift Current and District Early Childhood Intervention Program. This Program has been in existence for about one and one-half years. It now has two part-time home teachers who are offering excellent services to about fifteen families throughout the Region. Over the past year the Program has been offering services to increasingly younger children. This change in age has resulted from the Program becoming known throughout the Region and from earlier identification of children with handicaps.

The Early Childhood Psychologist has made a number of presentations to parent and professional groups. Some of these have been in Swift Current, but also included a Life Start Group in Frontier and play school groups in Maple Creek and Shaunavon. An innovation has occured in Swift Current in that the Early Childhood Psychologist has been part of the Update Classes, prenatal classes, oriented towards parents who already have children in the family.

The past year has been busy, with increases in case load, broadening community involvement, and establishing professional liaisons. The coming year promises to be even busier with the establishment of more effective early childhood services.

Raymond Hertzog, Ph.D.
Early Childhood Psychologist

Nutrition Report - February - May, 1984

Karen Cooper joined the staff as nutritionist on February 1, 1984. She is responsible to both the Swift Current and Moose Jaw Health Regions. The last Public Health Nutritionist headquartered in Swift Current left in 1962.

The priority is to promote eating habits which will help to keep people as healthy as possible. If Canadians ate more whole grain products, fruits and vegetables, minimized refined sugars, salt and alcohol, and limited fat, the incidences of heart disease, diabetes, certain types of cancer and several other diseases, would be lowered.

Program emphasis in the lifespan is placed upon the prenatal and infant to adolescent periods of the lifespan. To maximize coverage for a large population spread over an extensive area, the stress is on:

Nutrition can be fun! Teachers can use puppets, skits, cooking, games and many other activities to help students learn about good nutrition.

Parents have many questions about feeding their children. Why should you wait until 4 to 6 months of age before introducing solids? How can I encourage good eating habits? The effects of prenatal and infant nutrition are with a child for the rest of his/her life.

1) working with other professionals such as Public Health Nurses, teachers and Home Care workers

2) speaking to community groups

3) sharing information through newspapers and other mass media

A statistical report is found below.

Karen Cooper
Nutritionist

Statistical Report

- 9 regular nutrition newspaper columns were sent to weeklies. One extra release on coumarin was prepared in co-operation with the Public Health Inspectors.

- Spoke to three Division IV classes.

- Spoke to Public Health Nurses at their monthly conference. Oriented one new Public Health Nurse.

- Participated in the Nutrition Month Mall display.

- Spoke to a group of mothers at Maple Creek.

- As this is a new position, a considerable amount of time was spent talking with staff and members of other agencies and answering question.

Staff Members

**Swift Current
Regional Office
350 Cheadle Street West
773-8301**

Dr. J.N. Burkholder
Medical Health Officer

Mrs. Beatrice Williams
Acting Health Region Administrator

Mr. Lee Spencer
Regional Executive Director

Mrs. Delores Ast
Regional Nursing Supervisor

Mr. Frank Peters
Senior Public Health Inspector

Mr. John Bower
Public Health Inspector II

Ms. Maria Tuchscherer
Speech-Language Pathologist

Ms. Karen Cooper
Nutritionist

Dr. Raymond Hertzog
Early Childhood Psychologist

Mrs. Janette Pound
Senior Clerk Stenographer

Public Health Nurses

Ms. Hazel Padfield
Mrs. Laurie Pilkey
Ms. Lorna Russell
Ms. June Schmidt
Ms. Deborah Schroeder
Mrs. Bonnie Shaw
Mrs. Della Stumborg (nee Westman)
Mrs. John Whiteside
Mrs. Deborah Cortus (Part-time)
Mrs. Sharon McLaughlin (Part-time)
Mrs. Heather Millar (Part-time)

Public Health Inspector

Mrs. Robin Galbraith

Clerical

Mrs. Joyce Ross
Mrs. Sally Wiens
Mrs. Brenda Bergstrom

**Leader District Office
423 Main East, Leader
628-3701**

Public Health Nurse

Mrs. Jeannine Schmaltz

Clerical

Mrs. Joan Nixon (Part-time)

**Maple Creek Distric Office
Highway 21 South, Maple
Creek
662-2687**

Public Health Nurses

Mrs. Della Stumborg (nee Westman)
Mrs. Mary Wiseman
Mrs. Corinne Arnold

Public Health Inspector

Mr. John Paquette

Clerical

Mrs. Mary Rotnem (Part-time)

**Shaunavon District Office
45 - 3rd Avenue East,
Shaunavon
297-2731**

Public Health Nurses

Ms. Mariette Lucas
Ms. Kathy Nybo
Mrs. Wanda Atcheson (Part-time)
Mrs. Rana Meinert (Part-time)

Public Health Inspector

Mr. Wilmer Cave

Clerical

Mrs. Charlene Poppy (Part-time)

Media - Thanks and Appreciation

Newspapers	Radio Stations	Television Stations
The Southwest Booster	CJSN - Shaunavon	CJFB - Swift Current
Gull Lake Advance	CKSW - Swift Current	
Leader Weekly News	CJGL-FM - Swift Current	
Maple Creek News		
Shaunavon Standard		
Swift Current Sun		

Left to right: Mrs. Janette Pound, Miss Karleen Bellefeuille, Mrs. Sally Wiens, Mrs. Brenda Bergstrom.

Special Thanks

To clerical staff who provide the support service of our staff. Also thanks to all volunteers who helped in any way to carry out our Public Health programs.

The various programs of Community Health Services Branch carried out in the Swift Current Region includes the capable assistance of our clerical staff. A staff of four permanent and part-time clerical employees contribute to the workload which provides this very necessary support service to professional personnel and to the public of the Region.

Appendix — Health Region Satistics

Statistics for the Swift Current Health Region April 1, 1983 to March 31, 1984

Table 1
Public Health Nursing Statistics

	1983-84	1982-83
Public Health Nursing		
Total home visits	2,354	2,568
Number of CHC locations	30	32
Number of CHC's held (1 conference = ½ day)	1,032	1,059
Prenatal Service		
Home visits	84	97
Other contacts	219	209
Expectant Parent Classes:		
Number of classes held	191	169
Total attendance	2,968	2,231
Total mothers attended	1,606	1,237
Total fathers attended	1,362	994
Postnatal Services		
Home visits	469	466
Other interviews (i.e. Hospital)	956	782
Infant Services		
CHC attendance	2,908	2,690
Home visits and other contacts/interviews	928	550
Preschool Services		
CHC attendance	3,056	3,119
Home visit of other contact	329	269
School Health Services		
Total school enrollment	9,262	9,365
Students seen	6,383	7,313
Teacher - Nurse Conference (Re: Students and Program)	1,288	1,368
Students discussed with parent	1,111	1,008
Other contacts with students	67	47
Auditory screening	1,611	1,816
Scoliosis screening	1,894	1,127
Immunization		
Infant (0 - 12 months)		
Total immunization given	4,192	3,668
DPT 3rd dose	616	519
OPV 2nd dose	635	236
Preschool (1st - 7th birthday)		
Total immunization given	3,456	3,539
DPT recalls	1,177	1,341
OPV recalls	1,241	1,415
Measles, Mumps, Rubella	674	783

Table 1
Public Health Nursing Statistics
Continued

	1983-84	1982-83
School - (7th Birthday - school leaving)		
Total immunization given	1,623	2,004
DT recalls	616	742
OPV recalls	658	777
Rubella	76	97
(DPT - Diptheria, Pertussis, Tetanus OPV - Oral Polio Vaccine)		
Adult Services		
Home visits and contacts - over 65 years	986	908
Home visits and contacts - other adults	850	895
Total adult health conference held	132	131
(1 conference = ½ day)		
Total attendance - Adult Health Conference	1,271	1,142
Total immunization given	248	211
Other Services		
Communicable Disease - home visits or other contacts	130	77
Home visits to physically handicapped and mentally ill	109	153
Total official visits (physician - hospital personnel, social workers, etc.)	1,131	1,112
Other referrals (to physicians, dentists, early childhood psychologist speech pathologist, social workers, etc.)	949	986
Total number of group educational meeting in which public health nurse participated	75	78

Public Health Inspection Statistics

Type of Facility Inspected or Visited	Number of Facilities in Region	Number of Initial Complete Insp. 1983-84 *	Total Number of Inspections and Visits 1983-84	Total Number of Inspections and Visits 1982-83
Public Easting Establishments	175	175	673	778
Food Distribution	75	75	114	114
Food Processing	30	30	46	46
Liquor Outlets	48	48	129	121
Communal Water Systems	37	37	104	142
Private Water Supply	-	-	14	16
Public Water Supply	50	50	67	331
Communal Sewage Systems	36	36	49	79
Private Sewage Systems	-	-	26	31
Solid Waste Disposal	70	70	241	275
Liquid Waste Disposal	3	3	10	13
Hospital	11	11	12	14
Schools	83	75	84	55
Institutions	34	35	42	46
Housing	-	-	61	73
Mobile Home Courts	5	5	12	7
Trailer Courts	12	12	18	23
Hotels	35	35	70	68
Motels	30	30	38	51
Industrial Facilities	-	-	12	37
Swimming Pools	33	30	117	186
Agricultural Facilities	-	-	19	14
Personal Services Facilities	59	38	74	63
Recreational Facilities	59	59	150	138
Public Facilities	3	3	10	29
Plumbing	-	-	698	544
Investigation	-	-	76	151
Total			2946	3461

Table 3
Speech-Language Pathologist Statistics

Activity	1983-84	1982-83	1981-82	1980-81
Referrals Received	107	246	302	213
Assessments Done	219	287	304	247
Therapy	280	241	149	338
Case Conferences	582.5	563	503	681
Follow-up	75	129	203	124
Dismissed	175	256	251	156

Types of Problems Assessed	1983-84	1982-83	1981-82	1980-81
Multiple	37	62	31	38
Articulation	34	72	70	48
Language	25	48	71	52
Stuttering	10	13	11	4
Voice	3	15	7	5
No Problem	57	75	113	85
Other	3	2	1	11
TOTAL ACTIVE CASELOAD	169	174	167	176

Table 4
Early Childhood Psychologist's Statistics

Type of Work:	
Casework	35.5%
Primary Prevention	16.7%
Consultation	11.0%
Community Development	5.9%
Travel	23.2%
Administration	7.7%

Details of Casework: Type of Problem	Average Age	Number of Visits
Developmental	3.8	15
Behavioral	4.0	13
Multiple	2.2	4
Other	3.0	1
Total	3.25	33
Source of Referral of New Cases:		
Public Health Nurse	5	
Speech Therapist	7	
Parent(s)	4	
Social Services	1	
Other	1	
Visits:		
Regional Office	27	
District Office	3	
Home	1	
Other	2	
Primary Prevention:		
Group Sessions	6	
Number of Participants	117	

Table 5
Vital Statistics

	1983	1982	1981
* Population	48,681	48,484	48,371
Births	717	700	734
Birth Rate	14.7	14.4	15.2
Infant Deaths - 0 - 12 months	3	8	8
- Under 28 days	0	5	4
- Stillbirths	2	1	4
Infant Mortality Rate	4.18	11.43	10.9
Neonatal Mortality Rate	0	7.14	5.4
Perinatal Mortality Rate	2.78	7.14	10.8
Total Deaths	405	420	431
Crude Death Rate	8.3	8.7	8.9

* Population figures supplied by Saskatchewan Hospital Services Plan, June 1983

Table 6
Notifications of Communicable Disease

(Number of Cases Reported)		
	1983-84	1982-83
Chicken Pox	8	57
Enteropathogenic E-Coli	1	4
Infectious Hepatis A	1	1
B	1	0
Unspecified	1	0
Meningitis (Haemophilus Influenza)	3	1
Pneumococcal	1	0
Pediculosis	6	0
Ringworm-Scalp	3	0
Salmonellosis	4	11
Scabies	2	2
Sexually Transmitted Diseases cases -	3	(Syphilis -1 Gonorrhea - 2)
Investigations contacts -	3	(Gonorrhea)

Table 7
Causes of Death

	1983			1982			1981		
	Total	M	F	Total	M	F	Total	M	F
All Causes	405	242	163	420	230	191	431	253	178
Diseases of Circulatory System	199	98	101	199	106	93	222	123	99
Cancer	83	54	29	77	42	35	92	47	45
Disease of Respiratory System	38	24	14	49	33	16	41	31	10
Accidents	23	20	3	23	17	6	25	20	5
Certain Causes of Perinatal Mortality	-	-	-	3	0	3	3	3	0
Diseases of Digestive System	17	13	4	20	7	13	17	10	7
Endocrine-Nutritional	15	10	5	16	9	7	7	2	5
Diseases of Genito-urinary System	7	6	1	8	1	7	1	1	0
Diseases of Central Nervous System	8	7	1	6	2	4	3	2	1
Blood Disease	1	0	1	1	1	0	1	1	0
Congenital Anomalies	1	1	0	4	2	2	3	1	2
Suicide	6	6	0	8	5	3	-	-	-
Homicide and Other Violence	1	1	0	3	2	1	-	-	-
All Others	6	2	4	3	2	1	16	12	4